

# Work Order ID 69558

Thursday, May 12, 2011 8:32:03 AM

Page 1

Item ID: D3575-1

Accept

Setup Start

Revision ID:

Item Name: Cabin Floor Protector

Stop

Start Date: 5/12/2011 Start Qty: 1.00

Cust Item ID:

Required Date: 5/12/2011 Req'd Qty: 1.00

Customer:

Reference:

Approvals:

Process Plan: *MK*

Date: *11-05-12* Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

Stop

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

D3575

Rev A

100



Waterjet

FLOW WATER JET

0.00

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg D3575 ☒ Dwg Rev: *A* ☐ Prog Rev: *A* ☐ 2-  
Deburr if necessary

*B 11-5-12*

*(1)*

110



QC

Quality Control

QC2- Inspect parts off machine FAI/FAIB

0.00

Memo

0.00

*B 11-5-12*

120



QC

Quality Control

QC8- Inspect parts - second check

0.00

Memo

0.00

*8 work*

*(+)*

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Work Order ID 69558

Thursday, May 12, 2011 8:32:03 AM



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Item ID: D3575-1

Accept



Setup Start



Revision ID:

Stop



Item Name: Cabin Floor Protector

Start Date: 5/12/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 5/12/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

0.00



Small Fab

Small Fab

Memo

0.00

Small Fab

Deburr if necessary.

SB 11/05/12

①

140

0.00



QC5- Inspect part completeness to step on W/O

QC

Memo

0.00

Quality Control

8 11/05/12

②

150

0.00



Identify as per dwg & Stock Location: \_\_\_\_\_

Packaging

Memo

0.00

Packaging

11/5/12 SP 12

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 69558**

Thursday, May 12, 2011 8:32:03 AM



Page 3

Item ID: D3575-1

Accept



Setup Start



Revision ID:

Stop



Item Name: Cabin Floor Protector

Start Date: 5/12/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 5/12/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

160

QC21- Final Inspection - Work Order Release

0.00



QC

Memo

0.00

Quality Control

11/5/12 [Signature]  
MF  
11-05-12

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

Thursday, May 12, 2011 8:31:59 AM

Page 1

Work Order ID: 69558

Parent Item: D3575-1

Parent Item Name: Cabin Floor Protector



Start Date: 5/12/2011

Required Date: 5/12/2011

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev :A New Issue 07-01-22 EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.125-F60029-04		Purchased	No			100	sf	1,826.215	10.666	11.22737			
GE PLASTICS LEXAN SHEET													

Location

Loc Qty

Loc Code

MAT018

1826.215789

116236

1826.21579

116 236

11-5-17

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

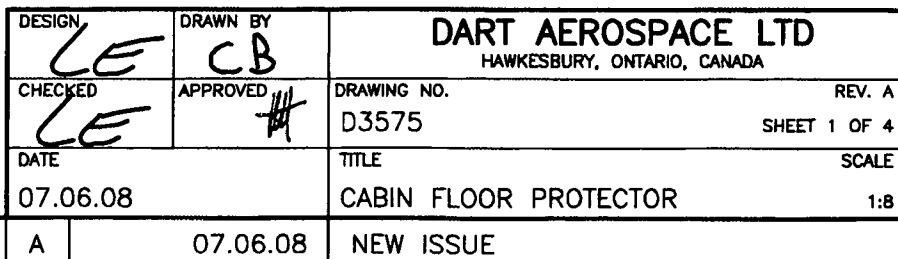
Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

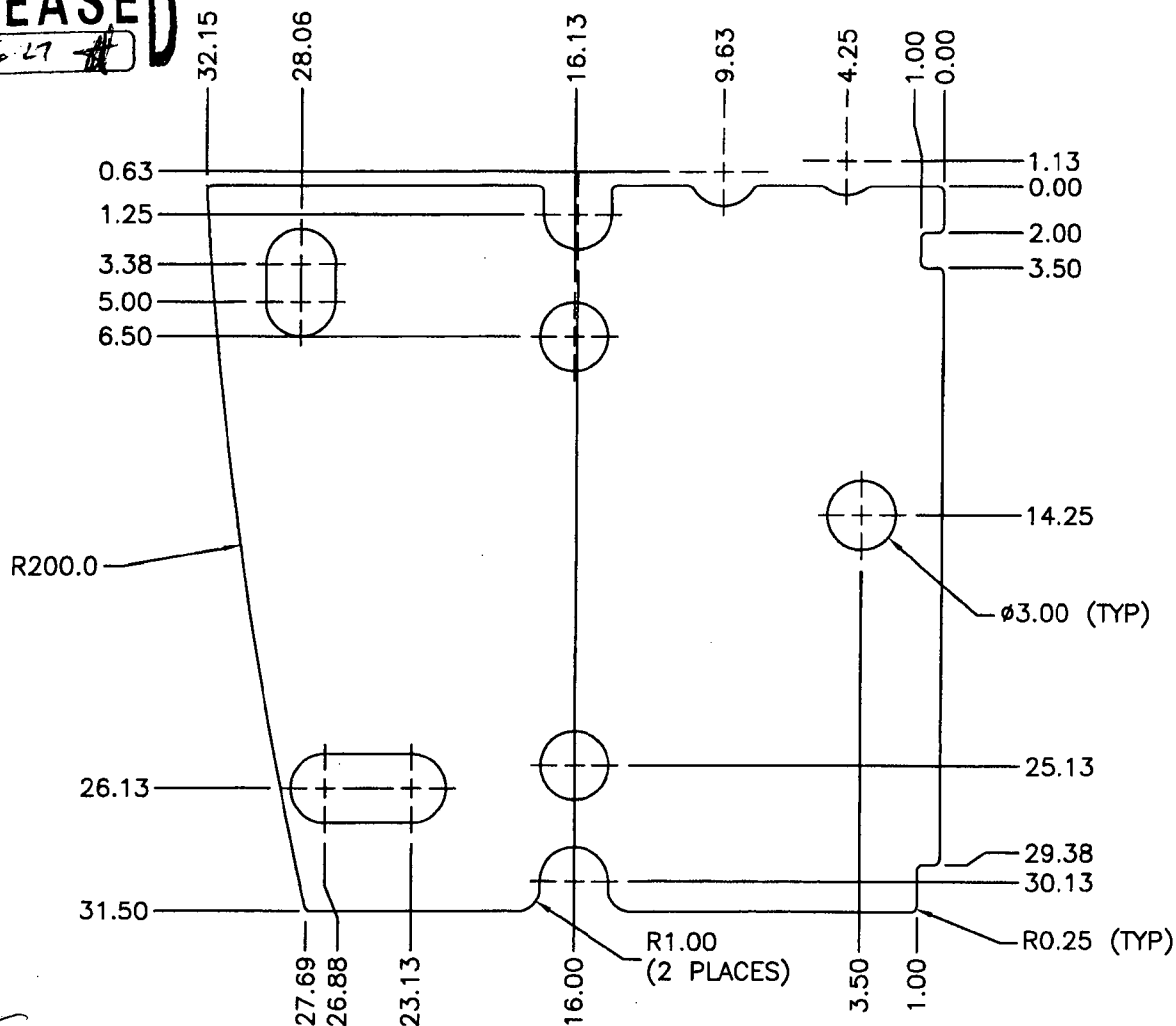
NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries





RELEASED  
07 Dec 27



NOTES:

- 1) MATERIAL: F60029 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE), 0.125 THICK,  
TEXTURED SIDE UP (REF DART SPEC MLEXS.125-F60029-04)
- 2) FINISH: NONE
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) IDENTIFY WITH DART P/N "D3575-1/-2" USING FINE POINT PERMANENT INK MARKER  
ON SMOOTH SIDE OF PART
- 5) ALL DIMENSIONS ARE IN INCHES UNLESS OTHERWISE NOTED
- 6) BREAK ALL SHARP EDGES 0.005 TO 0.010 MAX
- 7) CHECK PER TEMPLATE DT8966

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W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng		Sign & Date			

**NOTE:** Date & initial all entries

<b>DART AEROSPACE LTD</b>		<b>Work Order:</b> 69558
<b>Description:</b> Cabin Floor Protector		<b>Part Number:</b> D3575-1
<b>Inspection Dwg:</b> D3575	<b>Rev:</b> A	<b>Page 1 of 1</b>

### FIRST ARTICLE INSPECTION CHECKLIST

☒ First Article ☐ Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø3.00	+0.006/-0.001	3.001	✓		VB 02	
1.00	+/-0.030	1.00	✓		TIRU1	
3.50	+/-0.030	3.50	✓		T	
16.00	+/-0.030	16.00	✓		T	
23.13	+/-0.030	23.13	✓		T	
26.88	+/-0.030	26.88	✓		T	
27.69	+/-0.030	27.69	✓		T	
4.25	+/-0.030	4.25	✓		T	
9.63	+/-0.030	9.63	✓		T	
16.13	+/-0.030	16.13	✓		T	
28.06	+/-0.030	28.06	✓		T	
32.15	+/-0.030	32.15	✓		T	
2.00	+/-0.030	2.00	✓		T	
3.50	+/-0.030	3.50	✓		T	
14.25	+/-0.030	14.25	✓		T	
25.13	+/-0.030	25.13	✓		T	
29.38	+/-0.030	29.38	✓		T	
30.13	+/-0.030	30.13	✓		T	
1.25	+/-0.030	1.25	✓		T	
3.38	+/-0.030	3.38	✓		T	
5.00	+/-0.030	5.00	✓		T	
6.50	+/-0.030	6.50	✓		T	
26.13	+/-0.030	26.13	✓		T	
31.50	+/-0.030	31.50	✓		T	

<b>Measured by:</b> RB	<b>Audited by:</b> S	<b>Prototype Approval:</b>	N/A
<b>Date:</b> 11-5-12	<b>Date:</b> 11/05/12	<b>Date:</b>	N/A

<b>Rev</b>	<b>Date</b>	<b>Change</b>	<b>Revised by</b>	<b>Approved</b>
A	08.02.29	New Issue	KJ/DD	

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng		Sign & Date			

**NOTE:** Date & initial all entries